## (19) World Intellectual Property **Organization**

International Bureau





(43) International Publication Date 10 March 2005 (10.03.2005)

(10) International Publication Number WO 2005/021594 A2

- (51) International Patent Classification7: C07K 16/46, 16/30, A61K 39/395, A61P 35/00, G01N 33/574, C12N 15/10
- (21) International Application Number:

PCT/US2004/028004

- (22) International Filing Date: 27 August 2004 (27.08.2004)
- (25) Filing Language:

English

(26) Publication Language:

English

(30) Priority Data: 60/498,903

29 August 2003 (29.08.2003) US

- (71) Applicant (for all designated States except US): THE GOVERNMENT OF THE UNITED STATES OF AMERICA, as represented by THE SECRETARY OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES [US/US]; National Institutes of Health, Office of Technology Transfer, 6011 Executive Boulevard, Suite 325, Rockville, MD 20852-3804 (US).
- (72) Inventors; and
- (75) Inventors/Applicants (for US only): KASHMIRI, Syed, V., S. [US/US]; 11541 Brandy Hall Lane, Gaithersburg, MD 20878 (US). SCHLOM, Jeffrey [US/US]; 10301 Sorrel Avenue, Potomac, MD 20854 (US). PADLAN, Eduardo, A. [US/US]; 4006 Simms Drive, Kinsington, MD 20895 (US).
- (74) Agent: CARLSON, Anne; Klarquist Sparkman, LLP, One World Trade Center, Suite 1600, 121 SW Salmon Street, Portland, OR 97204 (US).

- (81) Designated States (unless otherwise indicated, for every kind of national protection available): AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW.
- (84) Designated States (unless otherwise indicated, for every kind of regional protection available): ARIPO (BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW), Eurasian (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European (AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR), OAPI (BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG).

## Declaration under Rule 4.17:

of inventorship (Rule 4.17(iv)) for US only

## Published:

- without international search report and to be republished upon receipt of that report
- with (an) indication(s) in relation to deposited biological material furnished under Rule 13bis separately from the description
- with sequence listing part of description published separately in electronic form and available upon request from the International Bureau

For two-letter codes and other abbreviations, refer to the "Guidance Notes on Codes and Abbreviations" appearing at the beginning of each regular issue of the PCT Gazette.

(54) Title: MINIMALLY IMMUNOGENIC VARIANTS OF SDR-GRAFTED HUMANIZED ANTIBODY CC49 AND THEIR

(57) Abstract: Humanized anti-TAG-72 CC49 monoclonal antibodies are disclosed herein. The antibodies include a light chain Complementarity Determining Region (L-CDR)1, a L-CDR2, and a L-CDR3; and a heavy chain Complementarity Determining Region (H-CDR)1, a H-CDR2, and a H-CDR3 from humanized antibody HuCC49V10. The L-CDR1, L-CDR2, L-CDR3 are within a HuCC49V10 light chain framework region that includes the corresponding amino acid from LEN at position 5, 19, 21, and 106 in the light chain. The H-CDR1, H-CDR2, and H-CDR3 are within a heavy chain HuCC49V10 framework comprising a human 21/28' CL residue at positions 20, 38, 48, 66, 67, 69, and 80 in the heavy chain. These humanized CC49 antibodies retain binding affinity for TAG-72 and have reduced immunogenicity, as compared to a parental HuCC49V10 antibody. Methods are disclosed herein for using these antibodies in the treatment or diagnosis of a tumor, such as a carcinoma, expressing TAG-72.

